PTO/SB/81 (04-05)

Approved for use through 11/30/2005. OMB 0651-0035
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number

POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM

ed to respond to a conection of information unless it displays a valid ONB control number.	
Application Number	10/623,942
Filing Date	7/22/2003
First Named Inventor	LOUIS W. JOHNSON
Title	Vertical Shaft Impactor, e
Art Unit	3725
Examiner Name	Jason Y. Pahng
Attorney Docket Number	2169

I hereby revoke all previous powers of attorney given in the above-identified application.				
I hereby appoint:				
X Practitioners associated with the Customer Number:	000039597			
OR				
Practitioner(s) named below:				
Name	Registration Number			
	entified above, and to transact all business in the United States Patent and			
Trademark Office connected therewith.				
Please recognize or change the correspondence address for the	above-identified application to:			
The address associated with the above-mentioned Cus	stomer Number:			
OR				
The address associated with Customer Number:				
OR				
Firm or Individual Name				
Address				
<u> </u>				
City	State Zip			
Country Telephone	Email I			
I am the:	Cition			
X Applicant/Inventor.				
Assignee of record of the entire interest. See 37 CFR 3.	.71.			
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)				
SIGNATURE of Applicant or Assignee of Record				
Signature Constant (Johnson Date 0/-30-2006			
Name LOUIS W. JOHNSON	Telephone 94/3458812			
Title and Company Company Compa				
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.				
*Total of forms are submitted.				

This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

PTO/SB/81 (04-05) Approved for use through 11/30/2005. OMB 0651-0035

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM

ed to respond to a collection of infor	mation unless it displays a valid OMB control number.	
Application Number	10/623,942	\
Filing Date	//22/2003	1
First Named Inventor	LOUIS W. JOHNSON	1
Title	Vertical Shaft Impactor,	etc.
Art Unit	3725	
Examiner Name	Jason Y. Pahng	1
Attorney Docket Number	2169	7

I hereby revoke all previous powers of attorney giver	n in the above-identified application.			
I hereby appoint:				
Practitioners associated with the Customer Number:	000039597			
Practitioner(s) named below:				
Name	Registration Number			
as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.				
Please recognize or change the correspondence address for the a XX The address associated with the above-mentioned Custo OR The address associated with Customer Number: OR				
Firm or Individual Name				
Address				
City	State Zip			
Country	I Farell I			
Telephone I am the: XX Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)				
SIGNATURE of Applicant or Assignee of Record				
Signature Prull L. Showson	Date 1/3///6			
Name BRUCE G. JOHNSON	Telephone 34/1847~6/43			
Title and Company				
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.				
Total of 2 forms are submitted.				

This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.